Commonwealth Bureau of Census and Statistics, MELBOURNE.

OFFICIAL STATISTICS,
COMMONWEALTH OF AUSTRALIA.



## APPENDIX TO

# MONTHLY SUMMARY

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# Australian Statistics

Bulletin No. 18. & June, 1913.

Statistics of Small-pox and Vaccination in Australia and Other Countries.

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BY

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At the time of issuing Bulletin No. 18, the full details of Statistics of Small-pox and Vaccination were not available. They are consequently now issued as an appendix.

G. H. KNIBBS.

14th August, 1913.

Commonwealth Statistician,

### No. 47-STATISTICS OF SMALL-POX AND VACCINATION.

At the present time the following statistics relating to small-pox and vaccination

may be of public interest:-

Table I. shews the recoveries and deaths in 1000 cases in Great Britain (vaccinated and unvaccinated persons in different ratios), the number of persons subject to identical risks being, however, unknown. It contains also the results for Japan.

From the aggregate of the cases occurring in the epidemics of the United Kingdom, shewn in Table I., it will be seen that the rates of recovery were as

follows, viz :-

That is, the death-rate among the unvaccinated was 3.786 times as great as the death-rate among the vaccinated. The frequency of attack was, however, much greater among the vaccinated, the figures being as follows:—

Vaccinated attacked 36,488 Deaths 3,545 = 9.72% Unvaccinated attacked 9,648 , 3,550 = 36.80% (Japan—Vaccinated attacked)\* 79,806 , 23,126 = 28.98%

That is, the number of vaccinated persons attacked was 3.782 times as great as the unvaccinated attacked. The significance of this relatively large frequency of attack on vaccinated persons may possibly be due to a great preponderance of vaccinated persons in the community. No figures are available shewing these numbers, but to be able to say whether vaccination offers any degree of immunity requires that the number of persons vaccinated and unvaccinated, exposed to equal risk of infection, should be known.

Table II. shews the percentage of deaths of children under 10 years of age compared with the estimated percentage of children who had not been vaccinated in the ten years previous to the epidemic. The percentage of deaths decidedly increases with the percentage of children not accounted for by vaccination. See note

immediately under table.

Table III. shews the attack rate of vaccinated and unvaccinated persons under and over 10 years of age. The attack rate was ascertained by comparing the total number of cases of small-pox which occurred in the epidemics under review, with the total number of immates of the dwellings in which such cases occurred, inmates and cases being each divided into vaccinated and unvaccinated. The table shews that the attack rate for children under 10 was about 6.8 per cent. for vaccinated, and 50.9 per cent. for unvaccinated, i.e.,  $7\frac{1}{2}$  times as great. For persons over 10 the figures were about 28.1 per cent. and 52.4 per cent., that is, only about 1.8 times as great.

Table IV. shews the severity of the attacks on vaccinated and unvaccinated persons. In this table varioloid or mild and discrete cases are classified as "mild," and coherent or confluent as "severe." This table shews that with the vaccinated, about 83 per cent of the cases were mild, and about 17 per cent, severe, and with the unvaccinated about 27 per cent, were mild and about 73 per cent, were severe. That is, mild cases were about 3.1 times as frequent with the vaccinated as with the unvaccinated, and severe cases were about 4.2 times as frequent with the unvaccinated

as with the vaccinated.

Table V. shews the percentage of deaths in cases of small-pox classified according to the number of vaccination marks borne by each patient. The table indicates that mortality was found to be less with an increase of the number of vaccina-

tion scars.

Table VI. shews the number of cases, deaths, and death rate of persons under and over 10 years of age, classified according to the number of vaccination marks

borne by each patient.

There is no complete statistical information available as to the number of deaths, or injuries attributable to vaccination itself, but it may be mentioned that in the classification drawn up by the eminent English statistician, Dr. Farr, and modified by his successor, Dr. Ogle (both medical men), provision was made for recording deaths arising from "cow-pox and other effects of vaccination," and Tables VIII. and IX. are given shewing the numbers of deaths which are to be credited directly to vaccination. These are from the Registrar-General of England's reports. The numbers, for obvious reasons, are too small, since they include only cases directly referable to vaccination.

\* See Table VII., page 5.

TABLE I.

RECOVERIES AND DEATHS PER THOUSAND CASES OF SMALL-POX
IN UNITED KINGDOM AND JAPAN.

IN UNITE	D KINGDOM	AND JA	PAN.			
PLACE.		RECOV- ERIES.	DEATHS.	TOTAL.	A	В
1.—Six Towns (1887–96) Sheffield, Dewsbury, London,	Vaccinated Unvaccinated	749 135	42 74	791 209	5.3 35.4	6.68
Warrington, Leicester, Gloucester (11,065 cases). Pop. 4,961,100. One case in 448 persons per annum.	Total	884	116	1,000	11.6	
2.—Sheffield (1887-8) (4,703 cases). Population, 310,350.	Vaccinated Unvaccinated	840 59	43 58	883 117	4.9 49.6	10.12
One case in 66 persons per annum.	Total	899	101	1,000	10.1	
3.—Leicester (1892–3) (357 cases) Population, 180,170. One case in 505 persons per annum.	Vaccinated Unvaccinated	552 389	6 53	558 442	1.1 12.0	10.91
One case in oos parsons per transmit	Total	941	59	1,000	5.9	
4.—Gloucester (1895–6) (1,979 cases) Population, 44,800. One case in 23 persons per annum.	Vaccinated Unvaccinated	551 230	61 158	612 388	10 0 40.7	4.07
	Total	781	219	1,000	21.9	
5.—Homerton and Fulham Hospital (1873–85) (12,987 cases)	Vaccinated Unvaccinated	718 110	87 85	805 195	10.8 43.6	4.04
	Total	828	172	1,000	17.2	
6.—Homerton and Fulham Hospital (1873–85), excluding 1,561 doubtful cases, of whom 440	Vaccinated Unvaccinated	718 125	61 96	779 221	7.8 43.4	5.56
died (11,426 cases).	Total	843	157	1,000	15.7	
7.—Glasgow (1892) (700 cases) Population, 668,400. One case in 955 persons per annum.	Vaccinated Unvaccinated	889 44	30	919	3.3 45.7	13.85
	Total	933	67	1,000	6.7	
8.—Glasgow (1900–1) (1,765 cases) Population, 755,300. One case in 428 persons per annum.	Vaccinated Unvaccinated	846	85 36	931	9.1 52.2	5.74
	Total	879	121	1,000	12.1	
9.—Islington (1901–2) (301 cases)	Vaccinated Unvaccinated	688	96	784 216	12.2 46.3	3.80
	Total	804	196	1,000	19.6	
10.—Annual Report of the Metro- politan Asylums Board for 1901–2 (9,659 cases).	Vac. or doubtful Unvaccinated	158	91 78	764 236	11.9 33.0	2.77
	Total	831	169	1,000	16.9	
11.—Annual Report of the Metro- politan Asylums Board for 1901–2 (9,659 cases).	Vaccinated Unvac. or dbtful		73 96	719 281	10.2 34.2	3.35
	Total	831	169	1,000	16.9	
2.—London, 30th Nov., 1901. Admitted to Metropolitan Asylum Board's Hospitals	Vaccinated Unvaccinated	591 91	136 182	727 273	18.7 66.7	3.57
(330 cases).	Total	682	318	1,000	31.8	
3.—London to end 1901. Admitted to Metropolitan Asylum Board's Hospitals (954 cases).	Vaccinated Unvaccinated	683	113 103	796 204	14.2 55.4	3.90
	Total	784	216	1,000	21.6	
4.—London, all cases 1901 (1,743 cases). Population, 4,536,500. One case in 2603 persons per annum.	Vaccinated Unvaccinated	687 145	100	787 213	12.7 31.9	2.51
	Total	832	1,68	1,000	16 8	
5.—London, all cases 1902 (7,916 cases) Population, 4,559,400. One case in 576 persons per annum.	Vaccinated Unvaccinated	670 161	89	759 241	11.7 33.2	2.84
# Wortel come observing a first	Total	831	169	1,000	16.9	
6.—Total cases above in 1, 5, 7, 8, 9, 10, 14, and 15 (46,136 cases).	Vaccinated Unvaccinated	714	77	791 209	9.7 36.8	3.79
T (1000 1010) (T0 00	Total	846	154	1,000	15.4	
7.—Japan (1896-1910) (79,806 cases). Population, 46,616,500, One case in 8762 persons per annum.	Vaccinated Unvaccinated	710 None*	290 None*	1,000 None*	29.0	

Column A.—Percentages of deaths in cases of vaccinated and in cases of unvaccinated persons.

Column B.—Percentage of deaths of unvaccinated persons divided by percentage of deaths of vaccinated persons (i.e., factor of advantage of vaccination).

\* Probably none.

### STATISTICS OF SMALL-POX EPIDEMICS IN ENGLISH TOWNS.\*

### TABLE II.

Tow	ns,	Date of Epidemic.	Estimated Mean Percentage of Children Unac- counted for as to Vaccination for Date 10 years earlier than Epidemic.	Total Small- pox Deaths.	Percentage of Deaths under 10 Years of Age to Total Deaths from Small-pox.
Warrington Sheffield London Dewsbury Gloucester Leicester		 1892-93 1887-88 1892-93 1891-92 1895-96 1892-93	$\begin{array}{c} 4.8\% \\ 4.5\% \\ 9.9\% \\ 32.3\% \\ 67.6\% \\ 68.1\% \end{array}$	62 589 182 110 434 21	22.5% 26.9% 36.8% 51.8% 64.5% 71.4%

The results in Table II. can approximately be expressed as follows:—The percentage of deaths from small-pox of children under 10 years of age, to the total deaths from small-pox, is about 16.2 times the cube root of the percentage of children unaccounted for as to vaccination for a date 10 years earlier than the date of the epidemic, and the form of the curve suggests that if no children remained unvaccinated the number of deaths from small-pox would be very small. Japanese experience (Table VII. hereinafter) modifies, however, this view, inasmuch as it shews that epidemics occur in spite of compulsory and repeated vaccination. The numbers on which the percentages are based are so small, however, that any deductions are precarious.

TABLE III.

Towns.		Date of		e of Children ears of Age.	Attack Rate of Persons over 10 Years of Age.		
			Epidemic.	Vaccinated.	Unvaccinated.	Vaccinated.	Unvaccinated
Sheffield Warrington Dewsbury			1887-88 1892-93 1891-92	7.9% 4.4% 10.2%	67.6% 54.5% 50.8%	28.3 % 29.9 % 27.7 %	53.6 % 57.6 % 53.4 %
Leicester Gloucester Arithmetic			1892–93 1895–96	2.5 % 8.8 % 6.8 %	35.3 % 46.3 % 50.9 %	22.2% 32.2% 28.1%	47.6 % 50.0 % 52.4 %

The numbers on which the percentages are based are so small, however, that any deductions are precarious.

TABLE IV.

			M	ild.	Severe.		
То	wns.		Vaccinated.	Unvaccinated.	Vaccinated.	Unvaccinated.	
London Sheffield Dewsbury Leicester Warrington Arithmetic	  Mean		89.0% 82.8% 82.0% 81.4% 78.2% 82.7%	35.2% 18.5% 23.1% 27.2% 29.4% 26.7%	11.0% 17.2% 18.0% 18.6% 21.8% 17.3%	64.8% 81.5% 76.9% 72.8% 70.6% 73.3%	

The numbers on which the percentages are based are so small, however, that any deductions are precarious.

\* See comment, page 2.

#### TABLE V.\*

Proportional Mortality of Cases of Small-pox treated in the Highgate Small-pox Hospital in 1836-51 and 1852-67, among Patients bearing one or more Vaccination Marks.

	Percentage	of Deaths.
Cases of Small-pox classified according to the Vaccination Marks borne by each Patient.	1836-51.	1852-67
Unvaccinated Stated to have been Vaccinated but having no cicatrix Having one vaccine cicatrix , two vaccine cicatrices , three , , , four or more vaccine cicatrices	35.5 % 21.7 % 7.6 % 4.3 % 1.8 % 0.7 %	34.9% 39.4% 13.8% 7.7% 3.0% 0.9%

### TABLE VI.\*

Deaths from Small-pox in the Fulham Hospital of Persons under and over 10 years of age, with the Proportional Case Mortality among Patients with one or more Vaccination Marks.

		One Ma	ark.	Two Marks.		Three Marks		Four or more Marks.				
Age.	Cases.	Deaths	Death Rate.	Cases.	Deaths	Death Rate.	Cases.	Deaths	Death Rate.	Cases.	Deaths	Death Rate.
0-10 Over 10 All ages	21 384 405	1 41 42	4.76% 10.68 10.37	29 509 538	1 46 47	3.45% 9.04 8.73	37 459 496	37 37	8.06% 7.45%	53 396 . 449		4.80% 4.23%

\* See comment, page 2.

That small-pox may become epidemic not only when vaccination is restricted but also in spite of vaccination, revaccination, and further "extraordinary" vaccination is shewn by comparing the statistics of England and Wales and Japan in Tables VIII. and IX. and VII. Compulsory vaccination was instituted in Japan in 1876, and was rigorously enforced throughout the country under Imperial Ordinance No. 34, issued in November, 1885. This requires vaccination every five to seven years. The last ordinance was repealed by that of the 14th April, 1909, which requires that every child shall be vaccinated before the June of the year following its birth; if this vaccination be unsuccessful then it must be vaccinated before the following June. Second vaccination is required in the tenth year after birth; if unsuccessful, vaccination must be effected before December of the following year. These provisions are said to be rigorously enforced. The following table shews that Japan is still subject to well-marked small-pox epidemics. The table shews the varying percentage of deaths in (presumably) vaccinated persons, the range being from about 2 per cent. to 41½ per cent., and averaging 30 per cent.

### TABLE VII.

### OCCURRENCES OF SMALL-POX IN JAPAN.†

Year.	No. of Cases.	No. of Deaths.	Percentage of Deaths.	Year.	No. of Cases.	No. of Deaths.	Percentage of Deaths.
					***		In Treat
1896	10,704	3,388	31.65	1904	1,227	237	19.32
7	42,347	12,316	29.08	5	301	62	20.60
. 8	2,034	395	19.42	6	519	109	21.00
9	1,613	250	15.50	7.0	1.053	437	41.50
1900	527	10	1.90	813	18,076	5.837	32.29
1	508	10	1.97	9	134	28	20.90
2	307	18.	5.86	1910	0001-1993	boised3	13.13
3	357	16	4.48				.B. oznica
			-,10			w sasov e	riaannira

† Figures taken from the Statistical Summaries of Japan.

Total Cases, 79,806; Total Deaths, 23,126; Percentage of Deaths = 28.98% Total Cases = 1 in 8,762 of the Population; Deaths = 1 in 30,236 of the Population.

DEATHS DUE TO SMALL-POX, CHICKEN-POX AND THE EFFECTS OF VACCINATION IN ENGLAND AND WALES.

TABLE VIII.

		Smal	ll-pox.		Chicken-	Cowpox and othe
Year.	Vaccin- ated.	Unvaccinated.	Not Known.	Total.	• pox.	Effects of Vaccination.
1080					100	21
1876				2,408	109 110	$\frac{21}{32}$
7				4,278	106	39
8			• •	1,856	89	
9				536		36
1880		1.000	1.070	648	103	41
1	652	1,068	1,378	3,098	133	58
2	176	325	816	1,317	122	65
3	78	162	717	957	99	55
4	493	595	1,146	2,234	129	53
5	580	795	1,452	2,827	109	52
6	25	43	207	275	93	45
7	42	111	353	506	87	45
8	91	269	666	1,026	116	45
9	4	2	17	23	83	58
1890	4		12	16	95	43
1	3	17	29	49	91	43
2 3	55	106	270	431	123	58
3	150	253	1,054	1,457	127	59
4	153	176	491	820	108	50
5	33	61	129	223	86	56
6	45	118	378	541	151	42
7	6	5	14	25	103	36
8	107	59	87	253	116	26
9	4	5	165	174	124	34
1900	7	17	61	85	127	25
1	141	111	104	356	115	17
2	821	791	852	2,464	123	22
3	123	174	463	760	116	26
4	75	124	308	507	104	28
5	23	20	73	116	93	26
6		1	20	21	106	29
7	2	2	6	10	120	12
8			12	12	93	13
9	5	6	10	21	94	11
1910	3	2	14	19	97	8
Total Proportion	5,741*	7,973*	16,635*	30,349	3,800	1,309
Vaccinated	18.92%	26.27%	54.81%	100%		

<sup>\*</sup> For the years 1876-80 the proportion of vaccinated and unvaccinated were estimated on the figures for the years 1881-1910.

In the period 1894-1906 inclusive, there were 12,057,507 births, and of these 8,438,459 were vaccinated as children, i.e., 70%. The percentages for successive years were as follow:—

1894. 5 6 7 8 9 1900. 1 2 3 4 5 6 70.7 65.9 62.8 61.0 66.5 68.7 71.4 74.8 75.3 75.3 75.8 73.4

### TABLE IX.

### DEATHS DUE TO SMALL-POX, CHICKEN-POX AND THE EFFECTS OF VACCINATION IN ENGLAND AND WALES.

Number of Deaths per One Million Persons. .

(See also Table XIII. hereinafter).

	per 1,00	Small-pox, per 1,000,000 Persons of the Population. Chicken- pox,					
Year.	Vaccinated.	Unvaccin- ated.	Not Known.	Total.	per 1,000,000 Persons.	ation, per 1,000,000 Vaccin- ated.	
1876 7 8 9 1880 1 2 3 4 5 6 7 8 9 1890 1 2 3 4 5 6 7 8 9 1900 1 2 3 4 5 6 7 8 9 1900 1 2 3 4 5 6 7 8 9 1900 1 2 3 4 5 6 7 8 9 1900 1 2 3 4 5 6 7 8 9 1900			53 31 27 42 53 8 13 24 1 * 1 9 35 16 4 12 * 3 5 2 2 3 2 4 1 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1	99 173 74 21 25 119 50 36 82 103 11 19 37 1 *  2 15 49 27 7 17 *  8 5 3 10 75 23 15 4 1 *  *  *  *  *  *  *  *  *  *  *  *  *	4 4 4 4 4 5 5 5 4 5 5 4 5 5 3 4 4 4 4 3 3 3 3	79 90 70 62 46 55 39 26 31 36 39 37 42	
1910 Average†	5.5	7.6	15.9	29.0	3.6	49.4‡	

<sup>\*</sup> In these years the number of deaths was not sufficient to produce a death-rate of more than 0.5, so the figures have been omitted.

† The average is based upon the totals of Table VIII. and the populations 1876-1910, the sole exception being final figure 49.4.

‡ Based upon the number vaccinated and number dying directly from that cause, 1804-1906.

It will be seen from this table that death as a consequence of vaccination is by no means rare; and the proportion of persons subjected to vaccination dying as a direct consequence thereof is about 14 times greater than the

<sup>1894-1906.</sup> 

number dying from chicken-pox, and 1.7 times greater than the number dying from small-pox itself under the average conditions existing between 1876 and 1910. For the interpretation of this result reference should be made to the evidence of other tables. The actual number dying are shewn on Table VIII.: 30,349 died of small-pox, 3800 of chicken-pox, and 1309 as a consequence of vaccination, in 35 years.

The extent of vaccination in Germany and Japan, which are probably the most thoroughly vaccinated countries in the world, is deducible from the figures given in the following tables:—

### STATISTICS OF VACCINATION.

GERMANY (FOR THE FIVE YEARS 1900 TO 1904 INCLUSIVE).

# TABLE X.

	Number of	Number	Per- centage Successful	Percent- age not	Not Vaccinated.		
	Persons due for Vaccination.	Successful.		Successful or Results Unknown.	Per- mitted.	Contrary to Law.	
First vaccination Revaccination	8,890,3 <b>4</b> 5 6,444,996	7,540,800 5,879,200	84.82 91.22	2.70 6.21	10.38 2.13	2.10 0.44	
Total Average per annum	15,335,341 3,067,068	13,420,000 2,684,000	87.51	4.18	6.91	1.40	

Average population, 1900 to 1904, 57,724,500

# TABLE XI. JAPAN (FOR THE FIFTEEN YEARS 1895 TO 1909 INCLUSIVE).

		Total Number of Vaccinations.	Number Successful.	Percentage Successful.
First vaccination Revaccination Extraordinary vaccination	• • •	22,807,919 37,940,845 24,368,230	19,241,153 12,904,901 8,063,603	84.36 34.01 33.09
Total vaccinations Average per annum		85,116,994 5,674,466	40,209,657 2,680,684	47.24

Average population, 1895 to 1909, 46,067,600.

### TABLE XII.

 $\begin{tabular}{ll} \it Mortality\ from\ Small-pox\ in\ various\ Countries. & Average\ for\ years\ 1862-1876\ 1882-1896,\ 1896-1910. \end{tabular}$ 

The number of deaths per 100,000 inhabitants were:—

Period.	Prussia and Bavaria.	Austria.	Belgium.	England.	Sweden.	Japan.
1862–1876 1882–1896 1896–1910	51.6 0.7	75.2 38.6	79.5 18.2	25.3 2.9	26.9 0.5	3.31

The relatively insignificant place which Small-pox takes compared with other common diseases, such as measles and scarlet fever is shewn by Table XV.



### DEATH THROUGH VACCINATION.

Complete Australian statistics of death due to vaccination are not available, but it may be mentioned that in Victoria, in the 21 years 1880 to 1900 inclusive, there were 5 deaths from small-pox and 14 deaths from the effects of vaccination. The English results of 49.4 deaths directly attributable to 1,000,000 cases of vaccination furnish only the cases where death is a direct consequence, whereas, in order to properly estimate the tribute to death which has to be paid for vaccination, what is required is the number of deaths that would not have occurred but for the fact of vaccination. Such a number is the proper number for comparison with the number of deaths attributable to small-pox in an unvaccinated community, or with some modification with a partially or completely vaccinated community.

modification with a partially or completely vaccinated community.

Table XIII. furnishes the number of deaths from small-pox per million for different periods, and Table XIV. the number of deaths that, according to English experience, would be directly referable to vaccination, with the death-rate 49.4 per million cases of vaccination, if it were enforced at the ages 6 months, 5½ years.

 $10\frac{1}{2}$  years,  $15\frac{1}{2}$  years, and  $20\frac{1}{2}$  years.

### TABLE XIII.

# ANNUAL DEATHS IN ENGLAND AND WALES FROM SMALL-POX PER 1,000,000 PERSONS, 1851 to 1910.

	-		1	1		1	1			li i	
1851 -	396	1861	66	1871	1,024	1881	119	1891	2	1901	10
1852	409	1862	81	1872	833	1882	50	1892	15	1902	75
1853*	174	1863	293	1873	102	1883	36	1893	49	1903	23
1854	153	1864	373	1874	92	1884	82	1894	27	1904	15
1855	136	1865	309	1875	40	1885	103	1895	7	1905	4
1856	121	1866	144	1876	99	1886	11	1896	17	1906	1
1857	206	1867	118	1877	173	1887	19	1897	+	1907	+
1858	335	1868	96	1878	74	1888	37	1898	8	1908	+
1859	197	1869	72	1879	21	1889	1	1899	5	1909	+
1860	140	1870	118	1880	25	1890	+	1900	3	1910	+

<sup>\*</sup> First year of compulsory vaccination. † Less than 0.5 per million.

#### INCREASE OF DEATHS BY VACCINATION.

### TABLE XIV.

Assuming that vaccination vas compulsory at the ages of 6 months,  $5\frac{1}{2}$  years  $10\frac{1}{2}$  years,  $15\frac{1}{2}$  years and  $20\frac{1}{2}$  years, the number of deaths *immediately* attributable to the effects of vaccination would, on the basis of the English experience for the years 1894-1906, be as follows:—

				England and	Wales 1910.	C'wealth. of	Australia 1912.			
	· AGE.			Approx. No. who attained each age in 1912.	Estimated No. of deaths from effects of vaccination.	Approx. No. who attained each age in 1912.	Estimated No of deaths from effects of vaccination.			
6 months $5\frac{1}{2}$ years $10\frac{1}{2}$ ,, $15\frac{1}{2}$ ,, $20\frac{1}{2}$ ,,				836,405 715,394 694,663 669,785 636,415	42 36 35 33 32	120,269 92,296 88,687 90,801 91,025	6 5 4 4 5			
		Total		3,552,662	178	483,078	24			
Mean Population				35,79	06,289	4,644,852				
effects on		ssumptio			5.0*		5.2*			

<sup>\*</sup> The number of deaths properly attributable is larger than this for reasons above indicated.

TABLE

### DEATHS, IN VARIOUS COUNTRIES, FROM SMALLPOX,

No.	Country.	!	1881.	1882.	1883.	1884.	1885.	1886.	1887.	1888.	1889.	1890.	1891.	1892.
1	Commonwealth of Australia	Small-pox Measles Scarlet Fever	2 192 175	25 68 162	155 129	5 519 292	4 111 148	31 122	. 25 131 88	2 252 149	33 106	 200	14 99	2 4 102
2	United Kingdom	Small-pox Measles Scarlet Fever		15518	11759		17244		19670					
3	New Zealand	Small-pox Measles Scarlet Fever	113 104	86 153	15 26	31 17	 1 12	54 7	30 18	6 21	 3 19	 1 31	 1 24	4
4	Canada (Ontario)	Small-pox Measles Scarlet Fever	5 148 470	15 75 543	$\begin{array}{c} 4 \\ 177 \\ 405 \end{array}$	63 81 382	30 78 314	19 149 260	169 116	128 132	141 159	186 151	 79 216	117 240
5	Ceylon	Small-pox Measles Scarlet Fever	237 610	320 78	335 5	347 41	726 50	462 166	89 170	145 184	97 235	88 287	452 574	69 390
6	Norway Sweden, and Denmark	Small-pox Measles Scarlet Fever	318 1,441 3,117	223 2,902 2,749	$^{129}_{1,280}_{3,600}$	$   \begin{array}{r}     61 \\     675 \\     3,851   \end{array} $	$   \begin{array}{r}     33 \\     727 \\     4,511   \end{array} $		1,290 2,931			$\begin{array}{c} 4 \\ 1,125 \\ 3,031 \end{array}$		
7	Finland	Small-pox Measles Scarlet Fev. }	8,057 2,336		784 3,642	321 4,179	279 5,256	266 5,696	180 1,767	99 1,048	130 1,425	90 2,933		790 7,576
8	German Empire (99 per cent.)	Small-pox (1) Measles Scarlet Fever	* *	* *	* *	* *	*	* *	* *	* *	* *	* *	* *	105 14614 10437
9	Austria	Small-pox Measles Scarlet Fever	10812	9,573	9,903	11953	11479	14209	14073	12627	8,990	15182	11816	8,941
10	Netherlands	Small-pox Measles Scarlet Fever	75 874 400	153 784 275	673 1,012 259	$\begin{array}{c} 62 \\ 2,193 \\ 1,017 \end{array}$	31 657 1,286	72 2,035 844	$18 \\ 1,541 \\ 428$	1,655 188	$1,620 \\ 98$	$1,526 \\ 77$	$1,331\\74$	1,200 246
11	Belgium	Small-pox Measles Scarlet Fever	2,721 2,936 1,895	3,048		2,622	3,253	2,653	610 3,233 1,082	$2,936 \\ 964$		636 4,187 1,064	4,196	2,528 4,319 871
12	France (2)	Small-pox Measles Scarlet Fever	*	* *	* *	* *	*	* *	*	*		1,537 7,196 731		2,705
13	Switzerland	Small-pox Measles Scarlet Fever	167 537 278	$   \begin{array}{r}     22 \\     250 \\     316   \end{array} $	24 220 243	64 157 247	426 390 150	341	14 451 163	·17 249 270	3 470 429	32 481 400	26 594 533	35 316 211
14	Italy	Small-pox Measles Scarlet Fever	* *	*	*	* *	*	* *	23768	20961	13800	14396	19551	1,453 12399 7,890
15	Japan	Small-pox (3) Measles Scarlet Fever	453 *	197 *	295	410 *	3,299 *	18676	9,967	853 *	328 *	25 *	721 *	8,409
16	United States (Registration Area equals 60 per cent).	Small-pox Measles Scarlet Fever	* *	* *	*	* *	* *	* *	*	* *	* *	* *	* *	* *

<sup>\*</sup> Information not available. (...) Indicates no deaths. (1) Including deaths from Rubeola. (3) Figures for whole of Japan for 1896 onwards from the Statistical

XV

### MEASLES, AND SCARLET FEVER COMPARED.

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1893.	1894.	1895.	1896.	1897.	1898.	1899.	1900.	1901.	1902.	1903.	1904.	1905.	1906.	1907.	1908.	1909.	1910	No.
$\begin{array}{c} 7 \\ 1,280 \\ 210 \end{array}$		6 103	 8 99	11 180	$1,452 \\ 234$	1 404 •131	132 41	5 138 24	1 416 104	19 89 193	28 100	133 44	41 61	147 37	125 63	1 31 74	124 48	1
15831	1,021 13763 6,465	$\begin{array}{c} 416 \\ 13855 \\ 5,904 \end{array}$	547 19649 6,897	38 15837 5,815	15826	13129	15175	11133	2,545 $15394$ $5,585$	841 10969 4,775	708 14340 4,251	13547	22 11277 3,854	14362	18 11372 3,280	21 13951 3.899	* *	2
525 1	14 5		 1 4	 1 2	57 2	i37	 9 10	 7 17	134 39	1 143 131	10 13		12 18	101 25	. 19 60		 1 13	3
*	* * 454	* *	136 99	80 169	115 222	7 40 246	11 143 170	7 181 268	7 143 346	21 55 580	30 163	63	128 64	166 102	38 163	3 167 200	304 237	4
$\begin{array}{c} 37 \\ 254 \\ \end{array}$	188 	372 	21 384 	25 566 · ·	13 292	96 188 	41 123	80 207	35 194 	158 	64 		72 296 	27 89	303 102	82 232 		5
$   \begin{array}{r}     26 \\     364 \\     1,984   \end{array} $			1,036 933		630 460	$\begin{array}{c} 1 \\ 1,142 \\ 714 \end{array}$	731 743	6 741 705	1,076 627	$1,188 \\ 537$	509 559	413	371 487	723 295	20 886 405	5 464 528	*	6
876		72	56	52	77	83	49	103	72	35	36		29	23	24	61	70	7
151 13555	84 16130	27 9,536	10 13462	5 10793	$\frac{16}{12728}$	25 12794	49 12317	52 16341	12 14085	18 14979	25 12389	27 9,421	47 13340	63 11330	2,773 65 10612	23 10269	*	8
5,821 7.503	2,512 14228	1,161 8.577	897 7.928	1,450 9,229	2,521 13765	1,899 11556	369 5.731	96 8.166	30 17169	17 5,546	17 8,260	20 6,789	39 9,107	41 6,805	10852 7,923 14965	13 12392	5 10079	9
190 795 233	625 737	79	$\begin{array}{c} 34\\1,171\\202\end{array}$	1 538	7 838 106	405	6 1,326	7 2,741	5 2,430	22 1,223	11 2,399	13 1,182	6 1,400	6 1,477	1 1,576	968	1,176	10
2,103 4,137 847	2,766	298 3,535 1,159	130 3,134 1,003	2,083	158 2,364 1,726	3,188	2,610	2,036	3,305	1,630 2,309 698	2,758	2,446	2,459 $785$	55 2,011 927	2,982 1,203	2,676	*	11
	3,056	1,082 2,095 675		2,831	2,828	670 3,046 796	2,521		2,317	2,163	2,055	1,783	3,754		171 3,222 1,495		* *	12
$     \begin{array}{r}       15 \\       870 \\       138     \end{array} $		1 185 62	8 423 89		354 34	3 264 38	30 809 34		456 73	545 162		657	14 569 153	613		3 373 170	*	13
12953	9.001	11322	11499	1,003 6,156 3,907	5.429	7.433	8.827	3,396 5,562 1,185	9,961	7,283	5,332	6,738	$ \begin{array}{c} 169 \\ 9,726 \\ 2,724 \end{array} $	8,184	559 11740 3,464	11043	*	14
11852 *	3,342	268 *	3,388	12276 *	362 *		$1,740 \\ 13$	3,643 6			154 1,434 15	4,129		2,107	4,274 2,742 126	36 4,504 339	*	15
*	* *	*	* *	*	* *	* *	3.865	1,085 <b>2</b> ,287 4,113	3,033	3,221	3,659	2,557	5,087	4,302	92 4,611 5,577	4,860	6,598	

<sup>(2)</sup> Prior to 1906 the figures relate to Towns only with a population over 5000 persons. Summary of Japan (published at Tokyo) are given on Table VII.

### COMPULSORY VACCINATION OF CHILDREN.

Compulsory Vaccination Acts exist in all States of the Commonwealth except New South Wales. Except in Victoria these Acts are, however, not generally en-

forced. (See Official Year Book of the Commonwealth, No. 6, p. 1097).

The years in which vaccination for children became compulsory in the Australian States and in some of the countries of Europe and Japan are as follows:—South Australia, 1853; Victoria, 1865; Western Australia, 1878; Tasmania, 1882; Queensland, 1900; Bavaria, 1807; Denmark, 1810; Sweden, 1814; Würtemberg, Hesse, and some other German States, 1818; Prussia, 1835; United Kingdom, 1853; German Empire, 1874; Roumania, 1874; Hungary, 1876; Sorvia, 1881; Austria, 1886; Japan, 1876.

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### GENERAL RESULTS.

The general deductions from the statistical results are as follow:—

- 1. In England the death rates amongst unvaccinated persons actually attacked are about  $3\frac{3}{4}$  times as great as among the vaccinated attacked.
- 2. There were  $3\frac{3}{4}$  times as many vaccinated persons attacked in England as unvaccinated, but this may be due to the larger numbers of vaccinated persons in the community.
- 3. Isolation has probably more effect than vaccination in preventing epidemics. (Compare results for Europe and Japan, and the experience of Australia.)
- 4. Epidemics may occur in spite of vaccination and re-vaccination, possibly due to insufficient care as to isolation. (Compare results for England, Japan, and Australia).
- 5. According to the English results the proportion of deaths from vaccination to the total number vaccinated is at least 14 times as great as the proportion of deaths from chicken-pox to the entire population. This risk, however, is not annually repeated.
- 6. Between the years 1894 and 1906 inclusive, in the then state of vaccination of the community, and with the degree of isolation secured, the frequency of death directly attributed to vaccination (i.e., number of deaths to number vaccinated) was 3.3 times the frequency of deaths from small-pox (i.e., number of deaths to the total population). These results are for England.
- 7. The frequency of death properly attributable to vaccination in England is not accurately known, but is no doubt higher than 50 per million cases of vaccination.
- 8. Compulsory vaccination every five years up to the 21st year would, on the basis of English experience, result in Australia in not less than 24 deaths annually from the effects of the vaccination itself.
- 9 There were only 108 deaths from small-pox in Australia between 1881 and 1910. Deaths from vaccination according to English experience would number 150 with only one vaccination in each lifetime.
- 10. The attack rate for small-pox appears to be greater amongst unvaccinated than amongst vaccinated persons. This appears also to vary with age, being, according to English experience, 7.5 times as great for persons under 10, and less than 1.8 times as great for persons over 10 (See Table III.).
- 11. Japanese experience appears to shew that repeated vaccination does not ensure immunity from attack,
- 12. Thirteen years experience of vaccination in England and Wales, 1894 to 1906, shews that the risk of death following directly from vaccination is no less than one in 20,000—that is for every 20,000 persons subjected to vaccination, one person will probably die as a *direct* consequence.

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